LOBBYING EXPENDITURI COVERING JANUARY 1 THROUBUE AUGUST 15				F 300:00 -W 13	oyistis R	t 14 egist rati d	n Nun
COVERING JULY 1 THROUGH) DUE FEBRUARY 15	DECEMBER 31	# #		F	OR OFF	ICE USE	
Instructions					stmark 1 化众	Date: <u>12∤.</u> S3	ः} इस्रीयस
 Print in ink or type. Fill in Registration Number in spaces provided. Complete form, have it notarized and return to Plaza Blvd., Suite 200, Baton Rouge, LA 7080 This form must be delivered or postmarked I This form may be faxed to (2.25)922-1414. The 	the Board of Ethics, 1 19 (225) 922-1400. by the due date.			1	9817	7 4 g	
on the day of fax (ransmittal.						(A)	* 8
Name MANNEAR W. STEVEN	7.			_			
	First	YNGROS A	MI				
			700				
	ELVD., BATON R	OOGE,	IA 708	02			
2. Business Address	ELVO., BATON R	OOGE,		2.0101	1/40-1/40-1	7000	X
2. Business Address Stress and No. 524E.	ELVO., BATON R	OOGE,	LA 708 Cay	2.0101	State	Zip	
2. Business Address Stress and No.	EVD., BAYON R	OUGE,		2.0101	State	Zip	
2. Business Address Stress and No. 524E.		OUGE,		2.0101	State	Zip	1000000 100000000000000000000000000000
2. Business Address Stress and No. 524F. Mailing Address (225) 344-6733		OUGE,		2.0101	State	Zip	
2. Business Address Stress and No. SPAF. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January	3 Telephone Number			2.0101	State	Zip	2000 2000 2000 2000 2000 2000 2000 200
2. Business Address Stress and No. SAMF. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January (Include expenditures from Schedules A and B)	3 Telephone Number y I through June :	30:			State	Zip	
2. Business Address Stress and No. SAMF. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January (Include expenditures from Schedules A and B) 5. Total of all expenditures made July 1 to a second schedules and a second schedules A and B)	Telephone Number y I through June :	30: r 31:		-0-	State	Zip	
2. Business Address Stress and No. SPAF. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January (Include expenditures from Schedules A and B)	Telephone Number y I through June :	30: r 31:		-0-	State	Zip	
2. Business Address Stress and No. SAMF. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January (Include expenditures from Schedules A and B) 5. Total of all expenditures made July 1 to a second schedules and a second schedules A and B)	Telephone Number y I through June : through December from Schedules A and	30: r 31:		-0-	State	Zip	
Stress Address Stress and No. SAME. Mailing Address (225) 344-6733 3. Business Phone Area Code and 4. Total of all expenditures made January (Include expenditures from Schedules A and B) 5. Total of all expenditures made July 1 (When Applicable) (Include expenditures 6. Total of all expenditures made during	Telephone Number y I through June : through December from Schedules A and calendar year:	30: r 31: B)	\$ \$ \$	-0- -0-		Zip	

LOBBYING EXPENDITURE REPORT



8.	Did you make expenditures exceeding	g the	sum of \$	250 for any	y on e le	gislator:		
	From January 1 through June 30? From July 1 through December 31?		Yes Yes	[X] [*]	No No		NA	
	If the answer to either question in Nu	mber	8 above	is YES, pl	ease cor	uplete S	chedule A and attach	
9.	Did you expend funds for a reception legislature, either house, any standing created by resolution of either house, delegation thereof were invited during	g com subc	mittee, so ommittee	elect comm of any cor	nittee, st	tatutory o	committee, committee	e
	☐ Yes			[2]	No			
	If the answer to Number 9 above is Y	ES.	olease co	molete Sci	redule F	and att	ach.	
	State of Louisiana Parish of East Paton Rouge	5:00 5:00	- 9					
	Before me, the undersigned authority,	ners	- onally ca	me and an	hareen			
	W. Steven Mannear					me did d	orlare and	
	acknowledge to me that the above sta	Signa	its are true	Ully obbyist	cct.	low		
		A. Notar	<i>andsa</i> y Public	B. 71	ra Car	rul	-0	

Page 2 of 4

SCHEDULE A: EXPENDITURES FOR LEGISLATORS

This schedule must be completed if you answered YES to either question 7 or 8 on the Lobbying Expenditure Report. If, during the period January 1 through June 30 or the period July 1 through December 31, you made either a) an expenditure for any one legislator exceeding \$50 on any one occasion or b) aggregate expenditures exceeding \$250 for any one legislator during a reporting period, then you must provide the aggregate total of expenditures made on that legislator in that reporting period.

1. LEGISLATOR'S NAME	2. AMOUNT OF EXPENDITURES MADE ON A LEGISLATOR FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$150 BETWEEN JANUARY I AND JUNE 30	3. AMOUNT OF EXPENDITURES MADE DN A LEGISLATOR FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXTENDITURES EXCEEDING \$250 BETWEEN JULY 1 AND DECEMBER 31	4. TOTAL OF COLUMNS 2 AND 3
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		CERTIFIC CONTRACTOR	4 24 C
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SCHEDULE B: EXPENDITURES FOR RECEPTIONS, ETC.

This Schedule must be completed if you answered YES to question 9 on the Lobbying Expenditure Report. The following information must be provided for all receptions, social gatherings, or other functions to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof, was invited.

1. NAME(S) OF GROUP(S) INVITED	2. DATE OF RECEPTION	3. LOCATION OF RECEPTION	4. TOTAL AMOUNT OF EXPENDITURES FOR ATTENDING LEGISLATORS *
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^{*} No amount expended on persons other than attending legislators is reportable.